

RECEIPT #3

PATENT
Docket No. 353532000710

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Assistant Commissioner for Patents, Washington, D.C. 20231, on February 25, 2000.

Patricia Ellison
Patricia Ellison

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Hugh L. NARCISO, JR.

Serial No.: 09/469,717

Filing Date: December 21, 1999

For: ANASTOMOSIS DEVICE AND
METHOD

Examiner: Not Yet Assigned

Group Art Unit: 3731

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REQUEST FOR A CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
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Washington, D.C. 20231

Dear Sir:

Please furnish the undersigned with a corrected Filing Receipt for the above-identified application. The corrections needed are as follows:

1. In the Applicants, after "NARCISO," please insert --JR.,--.

A copy of the marked-up Filing Receipt is attached.

Support for this correction can be found in the Declaration as filed with the application on December 21, 1999.

Applicant believes no fee is required. However, in the unlikely event that the Patent Office determines that a fee is required, applicant petitions for any required relief including extensions of time and authorizes the Assistant Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to Deposit Account No. 03-1952. However, the Assistant Commissioner is not authorized to charge the cost of the issue fee to the Deposit Account.

Respectfully submitted,

Dated: February 25, 2000

By: Sanjay S. Bagade
Sanjay S. Bagade
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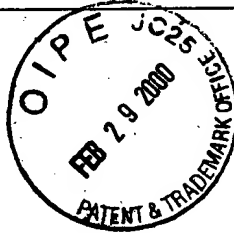
FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/469,717	12/21/99	3731	\$398.00	353532000710	9	22	3

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Morrison & Foerster, LLP
Palo Alto

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) ^{JR.} HUGH L. NARCISO, PALO ALTO, CA.

CONTINUING DATA AS CLAIMED BY APPLICANT-
THIS APPLN IS A DIV OF 09/037,216 03/09/98

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/10/00 ** SMALL ENTITY **
TITLE
ANASTOMOSIS DEVICE AND METHOD

PRELIMINARY CLASS: 606

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Bib Data Sheet

**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**Address: COMMISSIONER OF PATENTS AND TRADEMARKS
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SERIAL NUMBER 09/469,717	FILING DATE 12/21/1999 RULE _	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 353532000710	
APPLICANTS HUGH L. NARCISO JR., PALO ALTO, CA ; ** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 09/037,216 03/09/1998 <i>verified klp 10/27/00</i> ** FOREIGN APPLICATIONS ***** <i>WSP KE</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/10/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
ADDRESS MORRISON AND FOERSTER LLP 755 PAGE MILL ROAD PALO ALTO, CA 943041018					
TITLE ANASTOMOSIS DEVICE AND METHOD					
FILING FEE RECEIVED 398	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees		
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